

Clerk of the House of Representatives
Legislative Resource Center
B-106 Cannon Building
Washington, DC 20515

Secretary of the Senate
Office of Public Records
232 Hart Building
Washington, DC 20510

RECEIVED
SECRETARY OF THE

05 FEB 15 PM

LOBBYING REPORT

Lobbying Disclosure Act of 1995 (Section 5) - All Filers Are Required To Complete This Page

1. Registrant Name Hogan & Hartson L.L.P.			
2. Address <input type="checkbox"/> Check if different than previously reported 555 13th Street, N.W. Washington, DC 20004-1109			
3. Principal Place of Business (if different from line 2) City: _____ State/Zip (or Country) _____			
4. Contact Name Warnke, Christine M.	Telephone 202 637-5645	E-mail (optional) cmwarnke@hhlaw.com	5. Senate ID # 18422
7. Client Name <input type="checkbox"/> Self National Association of Home Health Care & Hospice			6. House ID # 30470

TYPE OF REPORT 8. Year 2004 Midyear (January 1-June 30) ☐ OR Year End (July 1-Dec

9. Check if this filing amends a previously filed version of this report ☐

10. Check if this is a Termination Report ☐ ⇒ Termination Date _____

11. No Lobbying

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

<p>12. Lobbying Firms</p> <p>INCOME relating to lobbying activities for this reporting period was:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input checked="" type="checkbox"/> ⇒ \$ <u>20,000</u> Income (nearest \$20,000)</p> <p>Provide a good faith estimate, rounded to the nearest \$20,000, of all lobbying related income from the client (including all payments to the registrant by any other entity for lobbying activities on behalf of the client).</p>	<p>13. Organizations</p> <p>EXPENSES relating to lobbying activities for this reporting period were:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇒ \$ _____ Expenses (nearest \$20,000)</p> <p>14. REPORTING METHOD. Check box to indicate accounting method. See instructions for description of methods.</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA definition</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 60 Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 16 Internal Revenue Code</p>
--	--

Signature

Christine Warnke

Printed Name and Title Warnke, Christine M. (Governmental Affairs Advisor)

LD-2 (REV. 6/98)

Registrant Name Hogan & Hartson L.L.P. Client Name National Association of Home Health Care & H

LOBBYING ACTIVITY. Select as many codes as necessary to reflect the general issue areas in which the registrant was engaged in lobbying on behalf of the client during the reporting period. Using a separate page for each code and provide information as requested. Attach additional page(s) as needed.

15. General issue area code HCR (one per page)

16. Specific lobbying issues

Medicare Reform/Prescription Drug legislation — S.1 and H.R. 1
FY05 Labor, HHS Appropriations

17. House(s) of Congress and Federal agencies contacted

☐ Check if None

House of Representatives
U.S. Senate

18. Name of each individual who acted as a lobbyist in this issue area

NOTE: To add the name of a lobbyist no longer employed by the firm, type the name into the drop down box above.

Name	Covered Official Position (if applicable)
Warnke, Christine M.	

19. Interest of each foreign entity in the specific issues listed on line 16 above

☒ Check if None

Signature

Christine Warnke

Date

2-11-05

Printed Name and Title Warnke, Christine M. (Governmental Affairs Advisor)

Form LD-2 (Rev. 6/98)

Page

Registrant Name Hogan & Hartson L.L.P.Client Name National Association of Home Health Care & H**Information Update Page - Complete ONLY where registration information has changed.**

20. Client new address

21. Client new principal place of business (if different from line 20)

City

State/

Zip:

22. New general description of client's business or activities

LOBBYIST UPDATE23. Name of each previously reported individual who is **no longer** expected to act as a lobbyist for the client**ISSUE UPDATE**24. General lobbying issues previously reported that **no longer** pertain☐☐☐☐☐☐☐☐☐**AFFILIATED ORGANIZATIONS**

25. Add the following affiliated organization(s)

Name	Address	Principal Place of Bu (city and state or co
		City: State: Zip: Country:

26. Name of each previously reported organization that is **no longer** affiliated with the registrant or client**FOREIGN ENTITIES**

27. Add the following foreign entities

Name	Address	Principal place of business (city and state or country)	Amount of contribution for lobbying activities
		City: Country:	

28. Name of each previously reported foreign entity that **no longer** owns, **or** controls, **or** is affiliated with the registrant or affiliated organization

Signature *Cheryl Wain* Date 2-11-05

Printed Name and Title Warnke, Christine M. (Governmental Affairs Advisor)

Form LD-2 (Rev. 6/98)

Page